UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND						
1 Date of Request: 7-15-05 2 Serial/Patent # 10/518633						
3 Please refund the following fee(s):		4 PAI NUM	PER MBER	5 DATE FILED	6 AMOUNT	
	Filing		/	12-20-04	\$ 50	
	Amendment				\$	
	Extension of Time				\$	
	Notice of Appeal/Appeal				\$	
	Petition				\$	
	Issue				\$	
	Cert of Correction/Terminal Disc				\$	
	Maintenance				\$	
	Assignment				\$	
	Other				\$	
			7 TOTAL AMOUNT S SO			
		8 TO	8 TO BE REFUNDED BY:			
10 REASON:			Treasury Check			
	Overpayment		Credit Deposit A/C #:			
	Duplicate Payment		9 0	2 5-0	120	
	No Fee Due (Explanation):					
11 REFUND REQUESTED BY:						
TYPED/PRINTED NAME: A JOHNSON TITLE: paulegal						
SIGNATURE:						
office:						
THIS SPACE RESERVED FOR FINANCE USE ONLY:						
APPROVED:						

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

PORM PTO 1577 (01/90) Office of Finance Refund Branch Crystal Park One, Room 802B